

President: Margarita Camacho, M.D.
mcamacho@nshs.edu

Vice President: Cindy Herrington, M.D.
Herri011@umn.edu

Secretary/Treasurer: Rebecca Wolfer, M.D.
rwolfer@aol.com



2006

Membership Application

(January 1, 2006 through December 31, 2006)

Name: _____

Hospital/Institution: _____

Mailing address: _____

Phone: (office) _____

Address: (home) _____

Phone:(best way to reach you): _____

E-Mail address: _____

What area within the organization would you like to volunteer?

Mentoring Community Education Membership Scholarships Other

Dues: Active membership \$100

Institutional membership: \$350

International membership: No dues

Associate membership (GS or TS resident): No fee (circle GS or TS)

If you are a GS, TS resident or fellow, please state your year of training _____

Emeritus membership (Retired from practice, or > 70 YO): No fee

Honorary membership: No fee

Optional: Donation to the Nina Braunwald Scholarship Fund through the TSFRE \$_____

Please remit to

Rebecca Wolfer, M.D.

4 Diamond Drive

Barboursville, WV 25504

Thank you for your support.

Visit our website: www.WTSnet.org and sign up to become a mentor